## COMMITTEE ON HEALTH FOR PEACE 701 First Avenue New York 17, New York

October 15, 1959

## Dear Friends:

The 1959 session of the Congress has now adjourned. The International Health and Medical Research Act of 1959, after having passed the Senate 63 to 17, was before the Subcommittee on Health and Safety of the Committee on Interstate and Foreign Commerce in the House of Representatives at the time of adjournment.

On August 28th, Rep. Oren Harris (D., Ark.), Chairman of the Committee on Interstate and Foreign Commerce announced that the Committee would not take any further action during this session on the International Health and Medical Research Act of 1959. Chairman Harris pointed out that the testimony from the hearings concluded on August 6th had "revealed a number of points at issue requiring further clarification and that a diligent effort would be made during the recess to clarify these points."

On September 3rd, Rep. John Fogarty (D., R.I.) spoke on the House floor in favor of this legislation.

During the discussion on his speech, Mr. Kenneth A. Roberts (D., Ala.) Chairman, Subcommittee on Health and Safety, Committee on Interstate and Foreign Commerce, stated his "enthusiasm" for this legislation but pointed out there had been some conflicting testimony at the hearings regarding the placement of responsibility for the proposed National Institute of International Health and Medical Research. Rep. Roberts was referring to the testimony of Secretary of Health, Education and Welfare who testified both at the Senate and House hearings.

Secretary Flemming summed by the administration's view in a press statement in which he said. "In a report on the bill last March to the Senate Committee on Labor and Public Welfare, the Department made it clear it favored the overall objectives of this legislation. However, we recommended the following important changes: that all authority under the proposal be placed in the hands of the President instead of the Surgeon General of the Public Health Service; that the mandatory requirement of a new institute at the National Institutes of Health to administer the program be eliminated; that appropriations be authorized without a specific statuatory ceiling."

In his testimony before the Senate Committee on March 9th and in his written statement submitted to Rep. Harris in connection with the hearings in the House, Secretary Flemming had said, in part:

- We recommended that basic statutory authority under the bill be vested in the President, with the expectation that it would be exercised by him through the Secretary of Health, Education and Welfare, under the policy guidance of the Secretary of State. This would insure that the size and certain other basic characteristics of this program will be determined, and the program operated, in the context of the total program of this country in the field of international health, including activities for health programs of an operational nature as contrasted with research and research training.
- 2. For the same reason, we recommend that instead of authorizing appropriations to be made to the several interested agencies of this Department, section 14 of the bill authorize that appropriations 'to carry out the provisions of this joint resolution' be made to the President as a part of the appropriations structure of the special assistance program. Funds allotted to this Department by the President under this authority would thus, in line with the preceding recommendation, be used for carrying out the provisions of this bill under such directions as may be given by the President, and subject to policy guidance by the Secretary of State.
- 3. We believe that a mandatory provision for the establishment of a National Institute for International Health and Medical Research is unnecessary and also unsound, in that it would introduce undue rigidity into the structure of the program and make more difficult the evolution of the most desirable pattern of administration of the program.
- 4. We strongly urge deletion of the specific statutory authorization of an appropriation of \$50 million annually in section 8 of the bills. The amounts to be recommended to Congress for carrying out this bill, if enacted, would have to be determined from time to time in the context of all of the other relevant activities in the field of international cooperation and aid. We do not believe that it would be wise to include a specific authorization which could be construed by foreign countries as a commitment on the part of the United States to appropriate that amount each year. "

Identical statements were included in a letter to Mr. Harris from Mr. William B. Macomber, Jr. Assistant Secretary, Department of State.

Concerning the recommendations that all authority under the proposal be placed in the hands of the President instead of the Surgeon General of the Public Health Service and that the mandatory requirement of a new National Institute of International Health and Medical Research, the Senate Committee on Labor and Public

Welfare report (May 11, 1959) stated in part:

"Section 3 provides for the establishment of a National Institute for International Health and Medical Research within the National Institutes of Health of the U.S. Public Health Service.

This Institute will constitute the principal organizational unit for carrying out the activities authorized in this joint resolution. The question of the best organizational location for the National Institute of International Health and Medical Research is a matter which arose both in the public testimony on Senate Joint Resolution 41 and in the discussions in the executive sessions of the committee.

The committee has carefully considered this matter, which it believes to be crucial. The committee has concluded that only through the establishment of a National Institute for International Health and Medical Research, as a part of the National Institute of Health and of the Public Health Service, can the purposes and objectives of this resolution be effectively accomplished.

The committee believes that the programs and activities under Senate Joint Resolution 41 should not become obscured and confused with international policies. The major considerations with which the administration of activities and programs under this joint resolution shall be concerned are those relating to the furtherance of health research, carried out on a scientist-to-scientist basis and not as a matter of government-to-government negotiation. "

On September 8th I received a personal letter from Rep. Roberts in which he said in part: "I hope that during the Congressional recess some steps can be taken toward working out solutions for the issues which have been raised by Secretary Flemming in connection with S.J. Res. 41."

On September 9th I received a personal letter from Rep. Harris in which he said in part: "The Subcommittee of which Mr. Kenneth A. Roberts is Chairman will consider the Resolution early in the next session and I should expect to bring it to the attention of the full Committee."

On September 8th I received a personal letter from President Eisenhower in which he said, in part: "I realize how disappointing it is to you to have your work in the program of 'Health for Peace' unproductive, but I am nonetheless appreciative of your efforts. I am glad, too, that you plan to rededicate yourself in the coming months to gaining support for the programs we both consider of vital importance." (underlining mine)

I have written you this lengthy letter so that you would understand the present status of the International Health and Medical Research Act of 1959. There has been growing enthusiasm for this legislation from all quarters. No one among the many

witnesses who testified before the Senate and the House Committees opposed the principles underlying the legislation. In my personal opinion that such differences of opinion as were expressed at the hearings were honest differences of opinion and that the failure from the Subcommittee on Health and Safety to report the bill out to the full Committee on Interstate and Foreign Commerce resulted from the lack of time to "work out" these differences. I am hopeful that these differences will be resolved in the recess and that early action will be taken on the legislation in the House of Representatives in 1960.

May I express to the members of the Committee on Health for Peace and others who have been interested and worked to promote public understanding of international health, medical and rehabilitation research, the deep gratitude of our Chairman, General Omar Bradley; our Chairman, Scientific Advisory Committee, Detlev Bronk, M.D.; and myself for your continuing efforts.

Sincerely,

Howard A. Rusk, M.D. Executive Vice Chairman

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